

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria 22313-1450



or Fax (571)-273-2885

appropriate. All further of	correspondence including d below or directed oth	g the Patent, advance or	ders and notification of n	naintenance fees w	ill be maile	ed to the current	correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
CROWELL & INTELLECTUA P.O. BOX 14300		Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
WASHINGTON, DC 20044-4300				(Depositor's name)			
							(Signature)
							(Date)
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/808,569	69 03/25/2004		Tomohiro Shirakawa		010482.53914US		4840
TITLE OF INVENTION	TRAY DEVICE MEC	HANISM FOR OPTICAL	DISC APPARATUS				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TO	TAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0		\$1700	03/28/2007
EXAM	INER	ART UNIT	CLASS-SUBCLASS				
MAGEE, CHRISTOPHER R		2627	720-608000		•		,
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to or agents OR, alternativ (2) the name of a single registered attorney or a 2 registered patent attor listed, no name will be	a single firm (having as a member a ey or agent) and the names of up to that attorneys or agents. If no name is vill be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for							
recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIC		(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
Funai Elec	tric Co., Ltd	paito-sni,	Daito-shi, Japan				
Please check the appropri	ate assignee category or	categories (will not be pr	inted on the patent) :.	Individual XX Co	rporation or	other private gro	up entity Government
4a. The following fee(s) a **Exissue Fee **Exist Fee **Exist Fee **Advance Order - #	o small entity discount p	 Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. ■ Payment by credit card. Form PTO-2038 is attached. ■ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 05-1323 (enclose an extra copy of this form). 					
5. Change in Entity Stat	tus (from status indicated s SMALL ENTITY state	,	☐ b. Applicant is no long				
NOTE: The Issue Fee and interest as shown by the r	d Publication Fee (if req ecords of the United Sta	uired) will not be accepted tes Patent and Trademark	d from anyone other than to Office.	he applicant; a regi	stered attor 007 SZEWD	rey or agent; or th	e assignee or other party in
Authorized Signature				01_FC:1 Date 02_P111 03_FC:8	501 501 001	, 2007	1400.00 OP 300.09 OP 15.00 OP
Typed or printed name	Jeffrey D. S	anok/ Stephen	. W. Palan	Registration N	0. 32,	169/43,42	U. 10100 UP
This collection of informan application. Confident submitting the completed this form and/or suggesting VASO. Alexandria, VASO. Alexandria, VASO.	ation is required by 37 C tiality is governed by 35 I application form to the ons for reducing this bu	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to th	on is required to obtain or r 1.14. This collection is est depending upon the indive e Chief Information Office COMPLETED FORMS TO	etain a benefit by the imated to take 12 reduced to take 12 reduced case. Any coers, U.S. Patent and THIS ADDRESS	he public when in the public when the comments on the comments on the comment of	nich is to file (and omplete, includin the amount of tin Office, U.S. Depa	by the USPTO to process) g gathering, preparing, and ne you require to complete rtment of Commerce, P.O. or Patents P.O. Box 1450

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.